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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL** 

For FY 2005

PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

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Complete if Known 09/550,173-Conf. #8838 **Application Number** April 14, 2000 Filing Date Norihisa OOE First Named Inventor D. A. Lambertson **Examiner Name** 

Applicant claims small entity status. See 37 CFR 1.27			Art Unit		1636			
TOTAL AMOUNT OF PAYMENT (\$) 2,950.00		Attorney Docket No.		2185-0424P				
METHOD OF PAYMENT	(check all	that apply)		· <u>-</u> -				-
X Check Credit Ca	ard 1	Money Order	Nor	e Other (	please ide	entify):		
Deposit Account Depos	sit Account Numl	ber: <u>02-2448</u> D	eposit Acc	ount Name:	Birch, S	tewart, Kolasch	& Birch, L	LP
For the above-identi	fied deposit	account, the Di	rector is	hereby authorize	ed to: (ch	eck all that apply)	)	
Charge fee(s)	indicated be	elow		Charge	e fee(s) i	ndicated below, e	except for th	ne filing fee
Charge any ac fee(s) under 3		s) or underpayr and 1.17	ment of	x Credit	any over	payments		
FEE CALCULATION								
1. BASIC FILING, SEARCH	=		S	<del>-</del>				
	FILIN	IG FEES Small Entity	SEA	ARCH FEES	EXAM	INATION FEES	3	
<b>Application Type</b>	Fee (\$)	Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity ) Fee (\$)	Fees F	Paid (\$)
Utility ·	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description		`					<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (includi Each independent claim over	_	•					50	25
Multiple dependent claims	r 3 (iliciuul	ing Reissues)					200 360	100 180
<u>Total Claims</u> Extra Claims Fee (\$) Fee Pa		Paid (\$)		Multiple Depend				
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Indep. Claims Extra C		Fee (\$)	Fee F	Paid (\$)				
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<ol><li>APPLICATION SIZE FEE If the specification and dra</li></ol>		ed 100 sheets o	f naner	(excluding electr	onically	filed sequence or	computer	
listings under 37 CFR 1	_			•	•	•	-	)
sheets or fraction thereo						• •		
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4. OTHER FEE(S)	<b>መ</b> ተ ቁላ  ድ		٠, 1٠				<u>Fees</u>	Paid (\$)
Non-English Specification	4.			ount) iinued examinat	tion (RC	F) (see 37	70	0.00
Other (e.g., late filing su				sponse within fil				60.00
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SUBMITTED BY					
Signature	してのいてまりしていたりし	Registration No. (Attorney/Agent)	28,977	Telephone	(703) 205-8000
Name (Print/Type)	Gerald M. Murphy, Jr.		-	Date	January 23, 2006